2017 - 08 - 01 - 05 - 00169204

FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVED FEC MAIL CENTER

2017 AUG - 1 AM 11:58

			Office Use Only
NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5
Dougle Eagle PA	C		· · · · · · · · · · · · · · · · · · ·
	PO Box 730		
ADDRESS (number and street) (Check if address			
is changed)			
	Hilmar CITY		STATE ▲ ZIP CODE ▲
COMMITTEE'S E-MAIL ADDRE	SS		
(Check if address is changed)	kellylawler@thekalgrou	p.com	
	Optional Second E-Mail Add	dress	
COMMITTEE'S WEB PAGE AD (Check if address is changed)			
2. DATE 07 27 2017			
3. FEC IDENTIFICATION NUMBER ▶ C			
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)	
I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.			
Type or Print Name of Treasurer Lawler, Kelly,			
Signature of Treasurer Lawler, Kelly A College Millian Date 1977 1997 1997			
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.			
Office Use Only	·	For further information of Federal Election Commiss Toll Free 800-424-9530	